Form (RF-3) ILLINOIS DEPARTMENT OF INSURANCE **SUMMARY SHEET**

Change in Company's premium or rate leve	I produced by rate revision effective	11/01/05
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private		
Passenger Commercial 2. Automobile Physical Damage		
Private Passenger Commercial		
Liability Other Than Auto	75,178	-12.2%
4. Burglary and Theft		
5. Glass		
6. Fidelity 7. Surety		
7. Surety 8. Boiler and Machinery		
9. Fire	-	
10. Extended Coverage	- M. 1	
11 Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other Line of Insurance		
Line of insurance		
Does filing only apply to certain territory (ter	ritories) or certain classes? If so_specify	" No
Brief description of filing. (If filing follows rate oss costs from filing GL-2004-BGL1 (+2.9% filings GL-2004-RDD04, a	change) and GL-2005-BGL1 (-13.3% c	hanged). We are also adopting rules
Adjusted to reflect all prior rate changes.		
**Change in Company's premium level whic	th will result from application of new rates	S.
	Azana	ut Ingurance Company
		ut Insurance Company Name of Company
		. Tamo or company
	Allison Angsta	adt - State Filings Coordinator
		Official – Title



Form (RF-3)

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level	produced by rate revision effective	11/01/05
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent <u>Change (+ or -)**</u>
Automobile Liability Private Passenger Commercial		
Automobile Physical Damage Private Passenger Commercial		
3. Liability Other Than Auto	10,005	-12.2%
4. Burglary and Theft		
5. Glass		
6. Fidelity		
7. Surety		
8. Boiler and Machinery 9. Fire		
10. Extended Coverage		
11. Inland Marine		
12. Homeowners		
13. Commercial Multi-Peril		
14. Crop Hail		
15. Other		
Line of Insurance		
Does filing only apply to certain territory (terr	itories) or certain classes? If so, specify:	No
boos ming only apply to certain territory (terri	noricely or deritain ordesees. It so, specify.	
Brief description of filing. (If filing follows rate	change) and GL-2005-BGL1 (-13.3% ch	nanged). We are also adopting rules
filings GL-2003-RRU03, GL-2004-RDD04, au	nd composite rating plan RP-2003-RCR	us and retro plan RP-2003-RRP03.
*Adjusted to reflect all prior rate changes. **Change in Company's premium level which	n will result from application of new rates	
	<u>.</u>	
		dwest Insurance Company
		Name of Company
	Allison Anasta	dt - State Filings Coordinator
		Official Title



Change in Company'	s premium	or rate level	produced	bγ	rate
Revision effective	12-18-05		•	•	

	(1)	(2) Annual Premium	(3) Percent
	<u>Coverage</u>	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	1,966,292	+17.3%
4. 5.	Burglary and Theft Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11 .	Inland Marine		DIVISION OF INC.
12.	Homeowners		
13.			CE INOIS/IDEPROE
14.	Crop Hail		- Nov
15.	Other		1 4 2005
	Line of Insurance		SPRINGFIELD, ILLINOIS
	es filing only apply to certain te sses? If so, specify:	rritory (territories) or ce	rtain
	ef description of filing. (If filing anization)		о гу
_	ase see cover letter and Expl		
	personal liability un		
* Ac	ljusted to reflect all prior rate changes.		
** CI	anges in Company's premium level which	will	

The Automobile Insurance Co. of Hartford,	CT
Name of Company	у
Sur m. Say	Director
Official - Title	

^{**} Changes in Company's premium level which will result from application of new rates.

Change in Company's premium or rate level produced by rate revision effective 03/01/2006

	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability - Private Passenger Commercial		
2.	Automobile Physical Damage - Private Passenger Commercial		
3.	Liability Other Than Auto	307,328	+1.3%
4.	Burglary and Theft		
5 .	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

See Filing Memorandum

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

See Filing Memorandum

* Adjusted to reflect all prior rate changes

** Changes in Company's premium level which will result from application of new rates.

The Charter Oak Fire Insurance Company Name of Company

Second Vice President

Official - Title

SPRINGFIELD, ILLINOIS

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

Change in Company's premium or rate level produced by rate revision effective		04/01/06	
	(1) Coverage	(2) Annual Premium Volume (Illinois)*	(3) Percent Change (+ or -)**
	Ovverage	volume (mmors)	Offange (1. Or -)
	Automobile Liability Private Passenger Commercial Automobile Physical Damage		
	Private Passenger Commercial Liability Other Than Auto (PCL) Burglary and Theft	\$481,000	+1.1%
5.	Glass Fidelity Surety		
8. 9.	Boiler and Machinery Fire		
11,	Extended Coverage Inland Marine Homeowners		
13. 14.	CMP Crop Hail		
15.	OtherLine of Insurance		
Brie	es filing only apply to certain territory (territory) of description of filing. (If filing follows rates are revising youthful driver rates for all five	of an advisory organization, specify or	
*^	ljusted to reflect all prior rate changes.		
**Cl	hange in Company's premium level which v		
		Erie Insurance Name of Co	
		Official - 1	Title

Form (RF-3)

SUMMARY SHEET

(Change in Company's premium or rate	e level produced by rate revision effective	2/1/06 New, 4/1/06 Renewals
	(1)	(2)	(3)
	(1)	Annual Premium	Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
	COVETAGE	volume (minors)	<u>Simily (* 51)</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$63,909	+2.5%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
		erritories) or certain classes? If so, specify:	
See I	Exhibit 1		
		rates of an advisory organization, specify of	
Accep	tance of most recent AAIS loss costs	in conjunction with revised company loss co	ost multipliers.

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.

DIVISION OF INSUFACE OF ILLINOIS/BETTANE OF ILLINOIS/BETTANE OF ILLINOIS OFFICIAL TITLE

SPRINGFIELD, ILLINOIS

H29219D

H29219D

SUMMARY SHEET

	Change in Company's premium or rat	e level produced by rate revision effective	2/1/2006
	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger Commercial		
2.	Automobile Physical Damage		
۷.	Private Passenger Commercial		
3.	Liability Other Than Auto	\$1,225,220	-9.9%
3. 4.	Burglary and Theft	Ψ1,223,220	7.770
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		· · · · · · · · · · · · · · · · · · ·
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		•
12.	Homeowners		
13.	Commercial Multi-Peril		
	Crop Hail	•	
14.	Crop man		
14. 15.	Other Line of Insurance		
15. Does f	Other Line of Insurance	erritories) or certain classes? If so, specify:	
15. Does f	Other Line of Insurance iling only apply to certain territory (to ises/Operations classes.	erritories) or certain classes? If so, specify:	organization):
15. Does f	Other Line of Insurance iling only apply to certain territory (to ises/Operations classes.		organization):
15. Does f	Other Line of Insurance iling only apply to certain territory (to ises/Operations classes.		organization):
Does f Prem Brief (Ado)	Citing of Insurance Line of Insurance iling only apply to certain territory (to ises/Operations classes. lescription of filing. (If filing follows tion of ISO loss costs revision.	s rates of an advisory organization, specify o	organization):
Does if Prem Brief (Adop	Other Line of Insurance iling only apply to certain territory (to ises/Operations classes. lescription of filing. (If filing follows tion of ISO loss costs revision. ljusted to reflect all prior rate change mange in Company's premium level w	s rates of an advisory organization, specify o	organization):
Does if Prem Brief (Adop	Ciling only apply to certain territory (trises/Operations classes. Lescription of filing. (If filing followstion of ISO loss costs revision. Ligidated to reflect all prior rate change mange in Company's premium level would from application of new rates.	s rates of an advisory organization, specify of the second	organization):
Does if Prem Brief (Adop	Ciling only apply to certain territory (trises/Operations classes. Lescription of filing. (If filing followstion of ISO loss costs revision. Ligidated to reflect all prior rate change mange in Company's premium level would from application of new rates.	s rates of an advisory organization, specify of the second	
Does if Prem Brief (Adop	Ciling only apply to certain territory (trises/Operations classes. Lescription of filing. (If filing followstion of ISO loss costs revision. Ligidated to reflect all prior rate change mange in Company's premium level would from application of new rates.	s rates of an advisory organization, specify of the second	n General Ins. Co.
Does if Prem Brief (Adop	Ciling only apply to certain territory (to ises/Operations classes. Lescription of filing. (If filing follows tion of ISO loss costs revision. Ligusted to reflect all prior rate change mange in Company's premium level we sult from application of new rates.	s rates of an advisory organization, specify of the second	
Does if Prem Brief (Adop	Ciling only apply to certain territory (to ises/Operations classes. Lescription of filing. (If filing follows tion of ISO loss costs revision. Ligusted to reflect all prior rate change mange in Company's premium level we sult from application of new rates.	s rates of an advisory organization, specify of the second	n General Ins. Co.
Does if Prem Brief (Adop	Cother Line of Insurance Line	s. rates of an advisory organization, specify of the second secon	n General Ins. Co.
Does if Prem Brief (Adop	Ciling only apply to certain territory (to ises/Operations classes. Lescription of filing. (If filing follows tion of ISO loss costs revision. Ligusted to reflect all prior rate change mange in Company's premium level we sult from application of new rates.	s. rates of an advisory organization, specify of the second secon	n General Ins. Co.

Change in Company's premium or rate level produced by rate revision effective 03/01/2006

	_	Annual Premium	Percent Change
	Coverage	Volume (Illinois)*	(+ or -)**
1.	Automobile Liability - Private Passenger Commercial		
2.	Automobile Physical Damage - Private Passenger Commercial		
3.	Liability Other Than Auto	79,001	+0.1%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

See Filing Memorandum

Brief description of filing. (If filing follows rates of an advisory organization, specification of filing.)

See Filing Memorandum

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See Filing Memorandum

* Adjusted to reflect all prior rate changes

** Changes in Company's premium level which will result from application of new rates.

NOV 2 9 2005

SPRINGFIELD, ILLINOIS

The Phoenix Insurance Company

Name of Company

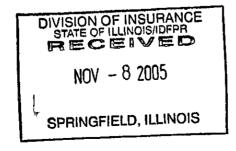
Second Vice President

Form (RF-3)

SUMMARY SHEET

	2 1 7 1	evel produced by rate revision effective	
	(1)	(2)	(3)
	_	Annual Premium	Percent
	Coverage	Volume (Illinois)*	<u>Change (+ or -)**</u>
1.	Automobile Liability		
	Private Passenger		
	Commercial		
2.	Automobile Physical Damage		
	Private Passenger		
	Commercial		
3.	Liability Other Than Auto	\$3,169,637	- 9% (estimated)
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
	iling only apply to certain territory (terr	ritories) or certain classes? If so, specify:	
No.			
		ates of an advisory organization, specify of	organization):
Revisi	on of rates and rules for Financial Prod	ucts Program.	

- * Adjusted to reflect all prior rate changes.
- ** Change in Company's premium level which will result from application of new rates.



RLI Insurance Company
Name of Company

Al Joseph, Manager, IDA
Official - Title

H29219D

Change in Company's premium or rate level produced by rate revision effective 03/01/2006

	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability - Private Passenger Commercial		
2.	Automobile Physical Damage - Private Passenger Commercial		
3.	Liability Other Than Auto	358,349	-1.9%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
_		(4- mile - i - a) a u a a da i a a la a a a a 0 16	if

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

See Filing Memorandum

Brief description of filing. (If filing follows rates of an advisory organization, specify organization):

SPRINGFIELD, ILLINOIS

See Filing Memorandum

* Adjusted to reflect all prior rate changes

** Changes in Company's premium level which will result from application of new rates.

The Travelers Indemnity Company

Name of Company

Second Vice President

Change in Company's premium or rate level produced by rate revision effective 03/01/2006

	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability - Private Passenger Commercial		
2.	Automobile Physical Damage - Private Passenger Commercial		
3.	Liability Other Than Auto	286,678	+3.1%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Doe	s filing only apply to certain territory (ter	ritories) or certain classes? I	f so, specify:
	Filing Memorandum		
Brief	f description of filing. (If filing follows rate	es of an advisory organizati o	n, specify organisationèe
	Filing Memorandum		STATE OF ILLINOIS/IDEPR
* Adji ** Ch	usted to reflect all prior rate changes anges in Company's premium level which will re	esult from application of new rates	NOV 2 9 2005
	The Travelers Ind	emnity Company of America	SPRINGFIELD, ILLINOIS

Second Vice President
Official - Title

SUMMARY SHEET

Change in Company's	s premium	or rate	level	produced	by ra	ite
	12-18-05			•		

	(1) Coverage	(2) Annual Premium <u>Volume (Illinois)*</u>	(3) Percent Change (+ or -)**
1.	Automobile Liability Private Passenger		
_	Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	107,975	+17.3%
4. 5.	Burglary and Theft Glass		
6.	Fidelity	·	
7.	Surety		
8. 9.	Boiler and Machinery Fire		
10	Extended Coverage		
11.	Inland Marine		DIVISIO
12.	Homeowners		DIVISION OF INSURANCE
13.	Commercial Multi-Peril		C LE NOIS/IDEADCE
14.	Crop Hail		
15.	Other		
	Line of Insurance	L	SPRINGFIELD, ILLINOIS
	es filing only apply to certain to sses? If so, specify:	erritory (territories) or c	ertain
		follows rates of an education	ioon
	ef description of filing. (If filing anization, specify organization		isory
	ase see cover letter and Expl		
	Dersoval leabilite un	els, lla	
	The same of the		
	ljusted to reflect all prior rate changes.		
** C	hanges in Company's premium level which	will	

The Travelers Indemnity Company of America	
Name of Company	
Sen misty	Director

^{**} Changes in Company's premium level which will result from application of new rates.

Change in Company's premium or rate level produced by rate revision effective 03/01/2006

	Coverage	Annual Premium F Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability - Private Passenger Commercial		
2.	Automobile Physical Damage - Private Passenger Commercial		
3.	Liability Other Than Auto	1,014,038	0.5%
4.	Burglary and Theft		
5.	Glass		 _
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Doe	s filing only apply to certain territory (ter	rritories) or certain classes? If so, sp	ecify:
See	Filing Memorandum		
Brie	f description of filing. (If filing follows rat	es of an advisory organization, spec	cify organization):
See	Filing Memorandum		DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR
* Adj	usted to reflect all prior rate changes langes in Company's premium level which will r	result from application of new rates.	NOV 2 9 2005
		demnity Company of Connecticut	
	Name of Company		SPRINGFIELD, ILLINOIS
	sui	Alelhas	

Second Vice President
Official - Title

Change in Company's premium or rate level produced by rate Revision effective 12-18-05

	(1) <u>Coverage</u>	(2) Annual Premium Volume (Illinois)*	(3) Percent <u>Change (+ or -)**</u>
1.	Automobile Liability Private Passenger Commercial	· · · · · · · · · · · · · · · · · · ·	
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	272,134	+17.3%
4.	Burglary and Theft	· · · · · · · · · · · · · · · · · · ·	
5.	Glass		<u> </u>
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		<u> </u>
9.	Fire		
10.	Extended Coverage	F	Ditto
11.	Inland Marine		DIVISION OF INSURANCE
12. 13.	Homeowners Commercial Multi-Peril		PRESENTITION OF THE PROPERTY O
13. 14.	Crop Hail		100
15.	Other		NOV 1 4 2005
١٠.	Line of Insurance		2000
	es filing only apply to certain te sses? If so, specify:	rritory (territories) or ce	PRINGFIELD, ILLINOIS
Ple * Ad	ef description of filing. (If filing anization, specify organization) ase see cover letter and Explaining. Justice to reflect all prior rate changes. The hanges in Company's premium level which we hange to the second control of the second co	: anatory Memorandum. nubrella	sory
	sult from application of new rates.		
	Travelers Persona	1 Insurance Company	
		Name of Company	

Director
Official - Title

Change in Company's premium or rate level produced by rate revision effective 03/01/2006

	Coverage	Annual Premium Volume (Illinois)*	Percent Change (+ or -)**
1.	Automobile Liability - Private Passenger Commercial		
2.	Automobile Physical Damage - Private Passenger Commercial		
3.	Liability Other Than Auto	915,003	-3.2%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11 .	Inland Marine		·
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		

Does filing only apply to certain territory (territories) or certain classes? If so, specify:

See Filing Memorandum

See Filing Memorandum

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDEPR
Brief description of filing. (If filing follows rates of an advisory organization, specifying and the property of the pro See Filing Memorandum

* Adjusted to reflect all prior rate changes

** Changes in Company's premium level which will result from application of new rates.

NOV 2 9 2005

SPRINGFIELD, ILLINOIS

The Travelers Property Casualty Company of America

Name of Company

Second Vice President

SUMMARY SHEET

	(1)	(2) Annual Premium	(3) Percent
	Coverage	Volume (Illinois)*	Change (+ or -)**
1.	Automobile Liability Private Passenger Commercial		
2.	Automobile Physical Damage Private Passenger Commercial		
3.	Liability Other Than Auto	601,715	-30%
4.	Burglary and Theft		
5.	Glass		
6.	Fidelity		
7.	Surety		
8.	Boiler and Machinery		
9.	Fire		
10.	Extended Coverage		
11.	Inland Marine		
12.	Homeowners		
13.	Commercial Multi-Peril		
14.	Crop Hail		
15.	Other		
	Line of Insurance		
Does f	iling only apply to certain territory (th Clubs and Fitness Centers	erritories) or certain classes? If so, specify:	
		s rates of an advisory organization, specify cation factor for Health Clubs and Fitness Co	

result from application of new rates.

DIVISION OF INSURANCE STATE OF ILLINOIS/IDEPR NOV - 2 2005 SPRINGFIELD, ILLINOIS West Bend Mutual Insurance Co. Name of Company

Katie K. Burns - Sr. Staff UW Official - Title

H29219D

ILLINOIS DEPARTMENT OF INSURANCE SUMMARY SHEET

ange in company's premium or rate level	produced by rate revision effective	06/01/2006
(1) <u>Coverage</u>	(2) Annual Premium <u>Volume (Illinois)</u> *	(3) Percent <u>Change (+ or -</u>)
1. Automobile Liability Private		
Passenger Commercial		
2. Automobile Physical Damage		
Private Passenger Commercial		
3. Liability Other Than Auto		-25.0%
4. Burglary and Theft	Westport 5,000	-23.076
5. Glass		
6. Fidelity	Westport 19,000	-6.3%
J. Fidelity		-
	÷	
7. surety		
8. Boiler and Machinery		
9. Fire		
Extended Coverage		
1: Inland Marine		
2. Homeowners		· · · · · · · · · · · · · · · · · · ·
Commercial Multi-Peril		
4. Crop Hail		
5. Other		
Line of Insurance	·	• •
es filing only apply to certain territory (ter	ritories) or certain classes? If so, specify	: No
ef description of filing . (If filing follows rate Adoption Of Advisory Organization Pro	tes of an advisory organization, specify or espective Loss Costs	ganization):
. aspect of the total of the second		·
*Adjusted to reflect all prior rate changes	s. which will result from application of new ra	tes.
*Adjusted to reflect all prior rate changes	s. which will result from application of new ra Westport Insurance Co	
*Adjusted to reflect all prior rate changes	which will result from application of new ra	

DIVISION OF INSURANCE
STATE OF ILLINOIS/IDEPR
NOV - 1 2005
SPRINGFIELD, ILLINOIS